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| 021567 7590 05/31/2006 WELLS ST. JOHN P.S. 601 W. FIRST AVENUE, SUITE 1300   |   |   | 2006   | Printed Name: SUNNY DOWNS  |   |   |  |
| SPOKANE, WA 99   | AUG 1   | J 1000 M  | Signature:   | suy Dun  |   |   |  |
|  |   | The Tex   | BELLAND  | Date:  | 117/06  |   |  |
| APPLICATION NO. FILING DATE  |   |   | FIRST NAMED INVENTOR                                     |  | ATTORNEY DOCKET NO.   | CONFIRMATION NO.  |  |
| 10/733,181<br>FITLE OF INVENTION: \$1  | 12/10/2003<br>MILONDYGTYRGYST                             |   | H. Montgomery  | Manning F FORMING CAPACITOR  | MI22-2295 DEVICES   | 8043  |  |
| APPLN. TYPE  | SMALL ENTITY  | , ISSUE FEE   |  | PUBLICATION FEE  | TOTAL FEE(S) DUE  | DATE DUE  |  |
| nonprovisional   | NO  | \$1400  |  | \$300  | \$1700  | 08/31/2006  |  |
| EXAMINER   |   | ART UNIT  |  | CLASS-SUBCLASS   |   |   |  |
| GHYKA, ALEXANDER G   |   | 2812  |  | 438-397000   |   |   |  |
| <ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol> |   |   | (1) the name or agents OR (2) the name registered att    | ames of up to 3 registered patent attorneys of a single firm (having as a member a dattorney or agent) and the names of up to red patent attorneys or agents. If no name is oname will be printed.  1 Wells St. John P.S.  2 |   |   |  |
| 3. ASSIGNEE NAME AND   | RESIDENCE DATA TO B                                       | E PRINTED ON T  | HE PATENT (  | print or type)   |   |   |  |
| PLEASE NOTE: Unless recordation as set forth in  | an assignee is identified be 37 CFR 3.11. Completion      | clow, no assignee of this form is NOT                     | data will appear<br>Γa substitute for                    | r on the patent. If an assig<br>r filing an assignment.  | nee is identified below, the  | document has been filed for   |  |
|  |   |   |  | ESIDENCE: (CITY and STATE OR COUNTRY)  |   |   |  |
| Micron Technology, Inc. Boise, ID  |   |   |  |  |   |   |  |
| Please check the appropriate   | assignee category or catego                               | ries (will not be pri                                     | inted on the pate  | ent): Individual <b>25</b> (   | Corporation or other private g  | group entity Government   |  |
| 4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):   |   |   |  |  |   |   |  |
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| a. Applicant claims SI   | (from status indicated above MALL ENTITY status. See      | 37 CFR 1.27.  |  |  | ALL ENTITY status. See 37   |   |  |
| The Director of the USPTO<br>NOTE: The Issue Fee and Printerest as shown by the reco   | ublication Fee (if required) v                            | vill not be accepted                                      | l from anvone o  | ther than the applicant; a reg   |   | cation identified above.<br>the assignee or other party in                                    |  |
| Advised Simulation (   |   |   |  |  | 1008 MBEVELLE 28000107  | 10733181  |  |
| Authorized Signature David G. Latwesen, Ph.D.  |   |   |  | Dat <b>g<u>i Feri</u><br/>02 FC:1</b><br>Registrative  | 501<br>504<br>501<br>38,533   | 1400.00 OP<br>300.00 OP   |  |
| This collection of information an application. Confidentialistic and application of the completed are  | on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. | 11. The informatio<br>122 and 37 CFR<br>O. Time will vary | n is required to<br>1.14. This collect<br>depending upon | obtain or retain a benefit by<br>ction is estimated to take 12<br>n the individual case. Any c   | the public which is to file (a minutes to complete, include comments on the amount of | nd by the USPTO to process)<br>ling gathering, preparing, and<br>time you require to complete |  |

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